Docket No.: _____

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought on the invention entitled_____

FRAME IN CATHODE RAY TUBE _____the specification of which

[**X**] is attached hereto   [ ] was filed on _____as Application Serial No._____ and was
                                     amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known to me to be material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s):		Foreign Filing Date
Number	Country	Month/Day/Year
2000 / 26075	Korea	May / 16 / 2000

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s):	Filing Date (Month/Day/Year)

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Prior U. S. Application or PCT Parent Number	Filing Date (Month/Day/Year)	Parent Patent Number (if applicable)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are   believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are   punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements   may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following attorney(s) and/or agent(s):Daniel Y.J. Kim, Registration No. 36,186 and Mark L. Fleshner, Registration No. 34,596; Carl R. Wesolowski, Registration No. 40,372, John C. Eisenhart, Registration No. 38,128, Rene A. Vazquez, Registration No. 38,647; Michael J. Cornelison, Registration No. 40,395; and Stuart I. Smith, Registration No. 42,159; and Carol L. Druzbick, Registration No. 40,287, all of

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with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and all future correspondence should be addressed to them.

****

Full name of sole or first inventor: **Sung Dae KIM**

Inventor's signature: _____ Date: 2001. 4. 10

Residence: **Taegu-Kwangyokshi, Korea**

Citizenship: **Republic of Korea**

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****

Full name of joint inventor(s): _____

Inventor's signature: _____ Date : _____

Residence: _____

Citizenship: _____

Post Office Address: : _____

****

Full name of joint inventor(s) : _____

Inventor's signature : _____ Date : _____

Residence: _____

Citizenship: _____

Post Office Address: _____

****

Full name of joint inventor(s): _____

Inventor's signature : _____ Date : _____

Residence: _____

Citizenship: _____

Post Office Address:: _____